Ceremonial Role Even	ts and Ticket/P	ass Distri	ibutions		A Public Document	
1. Agency Name				Date Stamp	California 802	
City of Lemon Grove						
Division, Department, or Region (if applicable)				RECEIVED	For Official Use Only	
City Managers Department						
Designated Agency Contact (Name, Title)				AUG 1620	18	
Lydia Romero, City Manager				Amendment (Mu	st Provide Explanation in Part 3.)	
Area Code/Phone Number E-mail			ITY MANAGER DEPA	SEPROVIDE Explanation in Part 3.)		
619-825-3800	lromero@lemongrove.ca.gov			Date of Original Filing:(month, day, year)		
2. Function or Event Infor	mation			-	07.00	
Does the agency have a tic	ket policy? Yes [⊠ No 🗆 F	ace Value of	Each Ticket/Pass \$	27.00	
Event Description: Pre-Conference VIP Reception Provide Title/ Explanation			Date(s) 10 / 03 / 18			
Ticket(s)/Pass(es) provided	·	□ No⊠ I	f no: <u>San Dieg</u>	o Housing Federati	ion	
Was ticket distribution made of agency official?	e at the behest Yes [] No⊠ ^I '	f yes:	Official's Name (Last, Fir	rst)	
3. Recipients						
 Use Section A to identify the ager 	ıcy's department or unit.	Use Section B to	identify an individ	lual. • Use Section C to ic	lentify an outside organization.	
A. Name of Agency, Depart	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy				
City of Lemon Grove Office of the Mayor	1	Performance of a ceremonial role or function representing the City at the event (Applicable City Policy 5.3, [a])				
B. Name of Ind	ividual	Number of Ticket(s)/	,	Identify one of the	he following:	
(Last, Fir	Passes					
			1	nonial Role Othe king "Ceremonial Role" or "Other		
				nonial Role Othe king "Ceremonial Role" or "Other	· -	
C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy			
I. Verification I have read and understand FF with the requirements.			I have verified		et forth above, is in accordance	
jaragunger		Romero		City Manager	<u> </u>	
Signature of Agency Head or Design	iee Pr	int Name		Title	(month, day, year)	

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Roatel Stamp California Form City of Lemon Grove For Official Use Only JUL 1 7 2018 Division, Department, or Region (if applicable) City Managers Department MANAGER DEPARTMENT Designated Agency Contact (Name, Title) Lydia Romero, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: 619-825-3800 Iromero@lemongrove.ca.gov (month, day, year) 2. Function or Event Information Does the agency have a ticket policy? Yes ⊠ No □ Event Description: ABA Gala Awards Date(s) __10 04 Provide Title/Explanation If no: Metropolitan Water District of Southern CA Ticket(s)/Pass(es) provided by agency? Yes ☐ No 🖾 Name of Source Was ticket distribution made at the behest Yes ☐ No ☒ If yes: _ Official's Name (Last, First) of agency official? Recipients • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization. Number Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. **Passes** Performance of a ceremonial role or function representing City of Lemon Grove 1 Office of the Mayor the City at the event (Applicable City Policy 5.3, [a]) Number Name of Individual Identify one of the following: B. of Ticket(s)/ (Last, First) Passes Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Other 🔲 Income 🔲 Ceremonial Role If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) Passes 4. Verification I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements Lydia Romero City Manager Print Name Title

Agency Report of:

Comment:

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form City of Lemon Grove For Official Use Only Division, Department, or Region (if applicable) RECEIVED City Managers Department AUG 1 6 2018 **Designated Agency Contact** (Name, Title) Lydia Romero, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: 619-825-3800 Iromero@lemongrove.ca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ Does the agency have a ticket policy? Yes⊠ No □ Event Description: 2018 Momentum Awards Gala Date(s) _____/ Provide Title/ Explanation If no: Circulate San Diego Ticket(s)/Pass(es) provided by agency? Yes ☐ No 🖾 Name of Source Was ticket distribution made at the behest Yes ☐ No ☒ If yes: _ Official's Name (Last, First) of agency official? Recipients · Use Section A to identify the agency's department or unit. · Use Section B to identify an individual. · Use Section C to identify an outside organization. Number Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy A. of Ticket(s)/ Passes City of Lemon Grove Performance of a ceremonial role or function representing 2 the City at the event (Applicable City Policy 5.3, [a]) Office of the Mayor Number Name of Individual В. of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Other \square Ceremonial Role Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes 4. Verification I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance Lydia Romero City Manager Print Name Title Signature of Agency Head or esignee

Comment: